



California Regional Water Quality Control Board

San Diego Region



Alan C. Lloyd, Ph.D.
Secretary for
Environmental
Protection

Over 50 Years Serving San Diego, Orange, and Riverside Counties
Recipient of the 2004 Environmental Award for Outstanding Achievement from USEPA

Arnold Schwarzenegger
Governor

9174 Sky Park Court, Suite 100, San Diego, California 92123-4340
(858) 467-2952 • Fax (858) 571-6972
[http:// www.waterboards.ca.gov/sandiego](http://www.waterboards.ca.gov/sandiego)

APPLICATION FOR CLEAN WATER ACT §401 WATER QUALITY CERTIFICATION

All applicants **must** provide a complete and detailed response to all sections of the application or the application will be deemed incomplete. Responses by reference shall indicate the specific document(s) and page number(s) (include copies of the entire document). Indicate by Not Applicable (NA) all sections that do not apply, along with an explanation of why the project is exempt from the section.

APPLICANT/AGENT INFORMATION

APPLICANT'S NAME	AUTHORIZED AGENT'S NAME AND TITLE
APPLICANT'S ADDRESS	AGENT'S ADDRESS
APPLICANT'S PHONE, FAX, EMAIL	AGENT'S PHONE, FAX, EMAIL

STATEMENT OF AUTHORIZATION

I hereby authorize _____ to act in my behalf as my agent in the processing of this application, and to furnish upon request, supplemental information in support of this permit application.

Applicant's Signature
(This **must** be signed by the applicant, not the authorized agent)

Date

OWNERSHIP

Does the applicant own the project site? Yes _____ No _____

If the project site is not owned by the applicant, provide the name, address, and phone number for the property owner as well as evidence that the applicant has the necessary approvals to construct the project at this location.

Does the applicant plan on selling all or a portion of the site after receiving the necessary approvals and prior to starting construction? Yes _____ No _____

If yes, provide the name, address, and phone number of the future land owner, if available.

PROJECT/ACTIVITY INFORMATION**PROJECT NAME OR TITLE**

AFFECTED WATER BODY(IES) (Provide a clear written description and clearly indicate affected water body(ies) on maps of appropriate scale.)

Are any of the waterbody(ies) considered isolated per SWANCC? Yes _____ No _____

LOCATION OF PROJECT (Attach map(s) showing project location.)

Street address _____

Latitude _____ Longitude _____

Assessors Parcel Number(s) _____

County _____ City _____

DIRECTIONS TO PROJECT SITE

PROJECT PURPOSE (Describe the reason or purpose for the overall project.)

DESCRIPTION OF ACTIVITY (Provide a full, technically accurate description of the entire activity and associated environmental impacts. Include proposed start and completion dates and dates for major phases of the project. If reference is made to documents submitted with this application, provide the specific document title and page numbers.)

AVOIDANCE AND MINIMIZATION OF IMPACTS (Describe efforts to avoid and minimize direct impacts to waters of the U.S.)

PROTECTION OF WATER QUALITY – CONSTRUCTION Describe efforts to avoid and minimize impacts to water quality during project construction. Include a discussion of erosion and sediment control measures, project scheduling, flow diversions, staging and material storage yards

PROTECTION OF WATER QUALITY – POST-CONSTRUCTION Describe efforts to avoid and minimize impacts to water quality following project construction.

- Include a description of each proposed land use (e.g., residential, street, commercial) identify the expected pollutants, specific post-construction BMPs, their effectiveness with regards to the expected pollutants, maintenance requirements, and party(ies) responsible for maintenance*.
- Also include a detailed description of how the project will address post-construction changes in flow rates, velocities, and shear stresses.
- Include a figure showing the location and type of all post-construction BMPs.

* The applicant must submit proof with this application that the parties designated as responsible for BMP maintenance have accepted the maintenance responsibility and are aware of the maintenance requirements.

PROTECTION OF WATER QUALITY - IMPAIRED WATER BODY(IES).

Are any of the water body(ies) within the project area, including impacted and preserved water body(ies), list as impaired on the Clean Water Act Section 303(d) list? Yes _____ No _____

Are any of the water body(ies) within the project area a tributary to a Clean Water Act Section 303(d) water body(ies)? Yes _____ No _____

Are any of the water body(ies) within the project area the subject of an adopted Total Maximum Daily Load (TMDL)? Yes _____ No _____

If yes, provide a detailed description of the actions that will be taken to ensure that the project does not contribute additional pollutants to the water body(ies). Include a discussion of the pollutants causing the impairment, potential sources of pollutants, and construction and post-construction BMPs.

FILL INFORMATION (indicate in ACRES and LINEAR FEET the proposed waters to be impacted, and identify the impacts(s) as permanent and/or temporary for each water body type listed below.) For purposes of this application, fill is defined as "rock, sand, soil, clay, plastics, construction debris, wood chips, overburden from mining or other excavation activities, and any materials used to create any structure or infrastructure in waters of the U.S."

Water Body Type*	Permanent Impact		Temporary Impact	
	Acres	Linear Feet	Acres	Linear Feet
ACOE vegetated waters				
ACOE unvegetated waters				
Lake/Reservoir				
Ocean/Estuary/Bay				
Isolated waters (per SWANCC)				
CDFG jurisdiction only				

* Provide a detailed description of the vegetated and unvegetated water body(ies) in an attachment. Include the plant community, type of water body (e.g., ephemeral, intermittent, perennial), designated beneficial uses, and a discussion of functions. Attach a copy of the completed wetland delineation to this application.

DREDGING Provide a description of the dredging activity and specific location, cubic yards of material to be dredged, disposal location and necessary approvals, dewatering methods, stockpile location, best management practices, and reason for dredging.

OTHER LICENSES/PERMITS/AGREEMENTS

OTHER APPROVALS List all applicable federal, state, and local permits, licenses, and agreements that will be required for any construction, operation, maintenance, or other actions associated with the project. Include permits from CDFG, ACOE (include permit number), RWQCB, California Coastal Commission, flood control agency, local planning agencies, etc. include date of application and status (e.g., pending, approved) of each. Attach copies of all draft or final documents and copies of CDFG and ACOE applications.

Agency	Contact (Include phone number, email)	License/Permit/Agreement	Date Applied	Status

COMPENSATORY MITIGATION

Is compensatory mitigation proposed? Yes _____ No _____

For all mitigation areas, provide a draft mitigation plan that includes, but is not limited to, the information contained in Attachment 1.

Indicate in ACRES and LINEAR FEET (where appropriate) the total quantity of **waters of the United States** proposed to be Created, Restored, Enhanced, or Preserved for purposes of providing Compensatory Mitigation.

Water Body Type/Plant Community Type	Created	Restored	Enhanced	Preserved

Note: Creation is defined as creating waters of the U.S. where none have previously existed; restoration is restoring waters of the U.S. where they have previously existed but have since been eliminated; enhancement is improving

existing waters of the U.S. (e.g., removing exotic species and replanting with natives); and preservation is protecting an area in perpetuity and place by a conservation easement, deed restriction, or other legal instrument.

Is the mitigation site owned by the applicant? Yes _____ No _____

(if no, provide the name, address, and phone number of the land owner and evidence (e.g., agreements, contracts, etc.) that the applicant has the necessary approvals to implement mitigation at this location. If the land is to be purchased, provide the expected date that the purchase will be complete.)

MITIGATION BANK/IN-LIEU FEE PROGRAM (If proposed)

Mitigation Bank/In-Lieu Fee Name: _____

Name of Mitigation Bank/In-Lieu Fee Operator: _____

Office Address of Operator/Phone Number: _____

Mitigation Bank/In-Lieu Fee Location (Latitude/Longitude, County, and City): _____

Mitigation Bank/In-Lieu Fee Water Body Type(s): _____

Mitigation Area (acres or linear feet) and cost (dollar): _____

APPLICATION FEE

FILING FEE A fee deposit of \$500.00 is required to be submitted with this application. Additional fees, based on the extent of impacts, may be due. A fee schedule and calculator can be found at:

<http://www.swrcb.ca.gov/rwgcb9/programs/401cert.html>

Is check payable to the "State Water Resources Control Board" attached? Yes _____ No _____

Check No. _____ Amount _____

CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)

Document Type/Title _____

Lead Agency and Contact Information (name, address, phone number) _____

State Clearing House Number _____

Has the document been certified/approved or has a Notice of Exemption been filed? Yes _____ No _____
(If yes, include a copy of the certification. If no, provide the expected approval date.)

Is this project considered an "emergency" pursuant to CEQA? Yes _____ No _____

Include a copy of the draft or final CEQA document with this application.

Note: The Regional Board is required to comply with CEQA before issuing a certification. Section 401 certification will **not** be granted without a certified CEQA document.

ADDITIONAL INFORMATION

Has any portion of the work been initiated? Yes _____ No _____

If yes, describe the initiated work and explain why it was initiated prior to obtaining a permit; indicate whether any enforcement action has been taken against the project.

PAST/FUTURE IMPACTS (Briefly list/describe any projects carried out in the last 5 years or planned for implementation in the next 5 years that are in any way related to the proposed activity or may impact the same receiving body of water. Include actual or estimated adverse impacts.)

SIGNATURE

I hereby certify under penalty of perjury that the information provided in this application and in any attachments are true and accurate to the best of my knowledge. I further certify that I possess the necessary authority to undertake the work described in this application.

Applicant's Signature

Date

(This **must** be signed by the applicant, not the authorized agent)

Attach the appropriate fee and any additional documents and submit this application to:

California Regional Water Quality Control Board, San Diego
Attn: 401 Water Quality Certification
9174 Sky Park Court, Suite 100
San Diego, CA 92123